PATENT APPLICATION FEE DETERMINATION RECORD									aplication or Docket Number				
Effective October 1, 2000									2925-0588P				
CLAIMS AS FILED - PART I (Column 1) (Column 2)									YIIIY	OR	OTHER SMALL		
TOTAL CLAIMS			24					RATE	FEE		RATE	FEE	
FOR			NUMBER	FILED	NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	·710.00	
TOTAL CHARGEABLE CLAIMS			24 min	us 20=	• 4			×2 9=		OR	·X\$18=	10	
INDEPENDENT CLAIMS			3 mi	nus 3 =	•			X40=.		OR	X80=	700	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+135=			+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2							'			OR		200	
CLAIMS AS AMENDED - PART II								TOTAL	13 AV 25	OR	TOTAL	782	
H/29/() (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL I		
AMENDMENT A		CLAIMS REMAINING		NUM	(EST (BEA	PRESENT		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
		AFTER AMENDMENT			POR	EKTRA		RAIE	FEE:		ANIE	FEE	
	Total	· 94	Minus .	- á	<i>7Y</i>	- /		X\$ 9=	•	OR	X\$18=	1.	
	Independent	• 3	Minus	•••	<u>3_</u>	- /		X40-		OR	X80=		
Ļ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							4135=	14.7.	OR	+270=		
A = A = A = A = A = A = A = A = A = A =							1	TOTAL		OR	TOTAL		
8	Column 1) · (Column 2) (Column 2)							ADOIT, FEE	<u> </u>	JON	ADDIT. FEE		
Ĕ		CLAIMS REMAINING		HUG	REST	(Column 3)	٦ i		ADDI-		·	ADDI-	
AMENDMENT B		AFTER AMENOMENT		PREVI	ABER HOUSLY HOR	PRESENT		RATE	TIONAL FEE		RATE	TIONAL	
	Total	.23	Minus	-2	14	• (1	X\$ 9=		OR	X\$18=	·	
	Independent	NTATION OF M	Minus		3 TCI AIM	•	4	X40=		OR	X80=	·	
<u></u>				CADEA	1004		J	+135=		OR	+270=		
		•				•		TOTAL ADDIT, FEE		OR	TOTAL ADOIT, FEE		
		(Column 1)		(Colu	mn 2)	(Column 3)			,	•	-5011. FEE		
AMENDMENT C		CLAIMS REMAINING		HIG	HEST ABER	PRESENT] [ADDI-			ADDI-	
		AFTER AMENDMENT			OUSLY FOR	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	• .	Minus	••	•	s ;		· X\$ 9= :	او الدسوك (بيت	OR:	X\$18=		
	Independent	•	Minus '	•••		•		X40=			XBO=		
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM]			OR		-	
# 135= +135= +135=										OR	+270=		
	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE OR ADDIT. FEE												
	The Highest Nur	ber Previously Pa	id For (Total o	r Independ	eti (tret	highest numb	or for	and in the ap	propriate bo	x in co	tumin 1.	•	